BOROUGH OF SALTASH

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RAPORT

of the

MEDICAL OFFICER OF HEALTH

for

1963.







TO THE MAYOR, ALDERSEN AND COUNCILLORS OF THE BOROUGH OF SALTASH.
Your Worship, Ladies and Gentlemen,

The estimated population of No. 7. Health Area showed a small increase of 570, and was 50,340 on 30th June, 1963. Apart from an increase of 460 in the Torpoint Urban District the changes in the other County Districts were insignificant.

The national trend of a rising birth rate was evident in the Health Area where the corrected rate rose to 18.5. per 1,000 of population, the highest rate so far reached since I commenced to keep records in 1950. The excess of live births over deaths was 37, and amongst the 743 live births there were 40 illegitimate births which represents a percentage of 5.4% of all live births. This is a slight improvement on the 1962 figure of 5.6%, and is below the figure of 6.9% for England and Wales in 1963. The stillbirth rate of 14.6 per 1,000 total births is the lowest do far recorded in the Health Area and is below the national rate of 17.3. The infant mortality rate at 13.5. per 1,000 live births is also the lowest so far recorded and compares favourably with the national figure of 20.9. Of the 10 infants who died during 1963, no less than 6 failed to survive the first critical week of life.

During 1963, the number of deaths registered was 706 a very slight decrease of the 1962 total of 710. The corrected death rate of 12.3 per 1,000 of population was only marginally above the national rate of 12. 2. The principal causes of death remained in the same order of frequency as in previous years. Heart disease was again the most prevalent cause of death, followed by cancer, strokes and respiratory disease in that order. That much publicised cause of sudden death - coronary heart disease - was responsible for 123 deaths rather more than the 110 deaths it caused in 1962. Of the defined forms of cancer that affecting the stomach caused 21 deaths, and was closely followed by cancer of the lung and bronchus which caused 20 deaths. In these 20 deaths the usual disparity between males and females continued - the mortality rate amongst males being almost six times that of females from this particular cancer. Breast cancer caused 15 deaths - a small reduction on the 1962 figure of 18 - but still quite high. one pauses to consider that this form of cancer is for all practical purposes confined to approximately half the total population i.e. the female, the incidence in terms of people at risk is on a par with or may even exceed that of more notorious cancers such as that affecting the lung and windpipe. Indeed, the most recent report of the South Western Regional Cancer Records Bureau shows a very small difference in the incidence of lung cancer in men, and breast cancer in women. It is however worth remembering also that many breast cancers can be, and are brought under effective treatment at an early stage with very much improved prospects of cure than is the case with lung cancer. This is borne out by the fact that whereas the 5 year survival rate in breast cancer is currently about 42% that in lung cancer is no more then 4%. This means that lung cancer is a very much more virulent type of cancer, a fact which should underline, and add weight to the warnings which have been given in recent years about the strong link between excessive consumption of cigarettes and deaths from this form of cancer.

During 1963 the total number of cases of notifiable disease notified was 685. Although greater than the total of 459 for the previous year, the incidence of this form of disease can still be regarded as moderate. Measles which was prevalent in the St. Germans and Liskeard Rural Districts, and in Saltash Borough was responsible for the great bulk of the notifications received. There was a small outbreak of Sonne dysentery in the Torpoint Urban District towards the end of the year. This is a mild form of dysentery characterised by abdominal pain and diarrhoea. Because the disease is mild it is likely that many cases do not seek medical advice and treatment, and are not aware that they may be sources of infection to others in the home, at school, or at their place of work. Attention to personal hygiene with special emphasis on washing of hands after visiting the toilet would do much to limit the spread of this disease.

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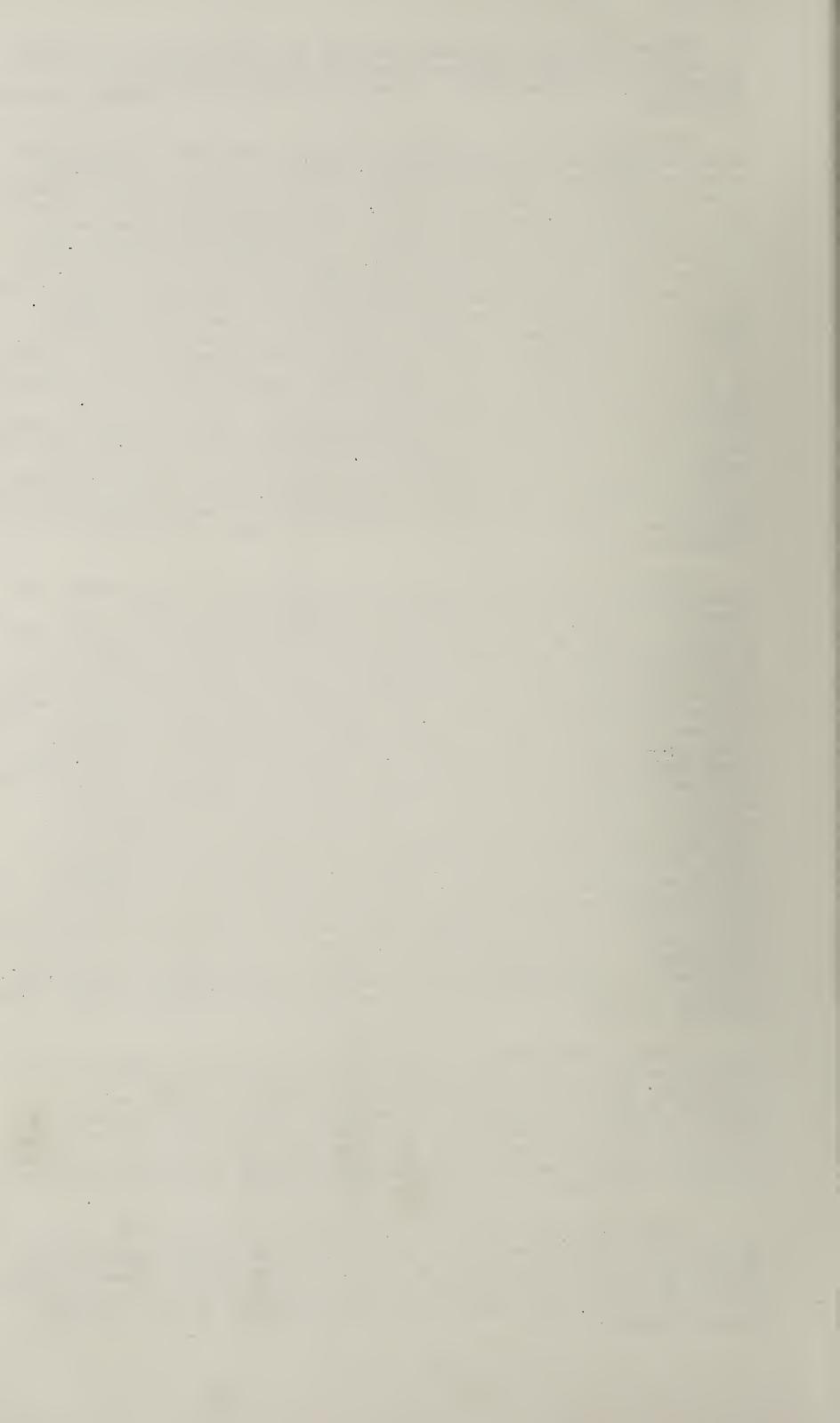
Of the more serious infectious diseases there was one case of meningitis and two cases of encephalitis the latter occurring as complications of influenza, and of German measles There were no deaths from notifiable disease during 1963.

I am glad to be able to report a fall in the prevalance of tuberculosis during the year when ll cases in all were notified. This is a considerable reduction on the 1962 total of 28 cases, and it is in fact the lowest incidence recorded in the Health Area in the sixteen years I have been working in this part of Cornwall. Of the 11 new cases, 5 were non-regiratory infections, a rather higher proportion than one expects for this form of the disease, which also unusually affected more females than males in the ratio of 7 to 4. trend in recent years for new tuberculous infections to be found in that section of the population aged 45 years and upwards was not so noticeable in 1963, although 5 of the 11 new infections were found in the 45-64 year age group. Whilst is is encouraging to be able to report this fall in new infections I am sure that we cannot jump to any hasty conclusion that tuberculosis as a disease is something which we can cease to worry about. Looking back over the incidence in the past sixteen years one is reminded of the fact that a year of low morbidity such as we experienced in 1963, can, for no apparent reason, be followed by an increase in the amount of tuberculous infection coming to light. I do feel that the incidence will in future years fall away to lower levels, but this decline will not be rapid or spectacular, and may well be interrupted from time to time by temporary upward trends in the prevalence of this disease. During the year one death only was attributed to tuberculosis. The case involved was a 77 year old man in whom I feel certain heart disease played a very large contributory part.

An increasing amount of the time and resources of welfare services and social agencies is nowadays directed to the care of elderly people. It is known that an increasing proportion of the community is composed of people aged 65 years and over, but it is only when a census is taken that the opportunity to precisely measure this figure presents itself. The detailed findings of the census taken towards the end of April 1961 are now to hand, and can be compared with corresponding figures for the 1951 census. As far as persons aged 65 years and over are concerned the number in the six County Districts in the Health Area increased from 7,339 in 1951 to 7,982 in 1961. If these totals are viewed in their relation to the total population it emerges that whereas in 1951 elderly people formed 13.9% of the population, this proportion had risen to 16.4% by 1961. This finding gives emphasis to the needto make special provision in various directions for the care and welfare of the older section of the community whether by way of specially designed dwellings where they can continue to live happy independent lives, or by provision of more places in homes for those no longer able to care adequately for themselves, by organisation of ancillary services such as meals on wheels, chiropody, home visiting, and the formation of local committees and organisations to meet and serve the special needs of old people. All these special provisions have been and are being made in this Health Area and plans to increase and broaden their scope in the future are in hand at both District and County Council level. There are still some old people, who, living under unsatisfactory conditions, resist or reject efforts to improve their but these are in the minority, and most are willing, even anxious to avail themselves of help.

With very few exceptions, the population in south east Cornwall is now very well served by piped water supplies of good quality and generally adequate in quantity. Improvement in the distribution system have provided more dependable supplies in districts which heretofore suffered from curtailment of supplies when the summer influx of visitors overtaxed local distribution systems. The stage has now been reached when, with a steadily increasing demand for water, the existing supply sources are being used to the limit, and further improvements and extension of supplies will depend on the exploration of new sources.

Progress continues to be made in providing modern mothods of sewerage and sewage disposal, particularly to some of the larger villages and hamlets in the St. Germans and Liskeard Rural Districts. The slow progress towards the final approval of a scheme for the Borough of Liskeard continued but I feel confident that we are at last within sight of actual work commencing on this large and important project.



The Urban District Council at Looe is again examining various methods of dealing effectively with the pollution of the river and the foreshore by crude sewage, and I hope that, being aware of the serious and thoroughly unsatisfactory nature of the present state of affairs, the Council will decide to take appropriate measures to abate this long-standing nuisance in the not too distant future.

With higher standards of living there has been a gradual increase in the volume of household and trade refuse which has to be collected and disposed of by District Councils. It is in the latter aspect of this service - refuse disposal - that problems are looming ahead. As existing tips become filled it is becoming increasingly difficult, even in lightly populated parts of the Rural Districts, to find new sites suitable for refuse disposal. If cre adds to this a more critical attitude on the part of the public to the use and control of refuse tips, the difficulty and expense of securing and transporting suitable covering material for use on the tip, and difficulties in obtaining sufficient and suitable men to work at this not very pleasant task, then something of the nature of the problem may be apprehended. My own feeling is that at present we are not spending enough on this essential service to make it as efficient and free of nuisance as sometimes happens when local resources fail to measure up to the task in hand. Indeed there may be some case for collaboration between neighbouring County Districtsparticularly in the utilisation and operation of refuse tipping sites. Certainly, if and when more elaborate and costly methods for disposal of refuse have to be used e.g. the composting system, the capital cost and operational costs of such methods are likely to be too high for a single District Council to bear.

With the gradual growth of proper methods of sewage disposal the disposal of sludge from sewage treatment works is showing up as something of a problem and is one which is bound to increase as new schemes are completed, and the amount of sludge to be disposed of increases. This material although of considerable value as a type of organic fertiliser to landowners, is not pleasant to handle and does carry with it some risk of introducing disease into land. In consequence farmers and others who might make use of it are not very keen to collect and use it. This is an additional reason for considering the composting system which, by using certain elements of household refuse together with sewage sludge, can produce a compost which is of value to and is readily accepted by those in agriculture and horticulture.

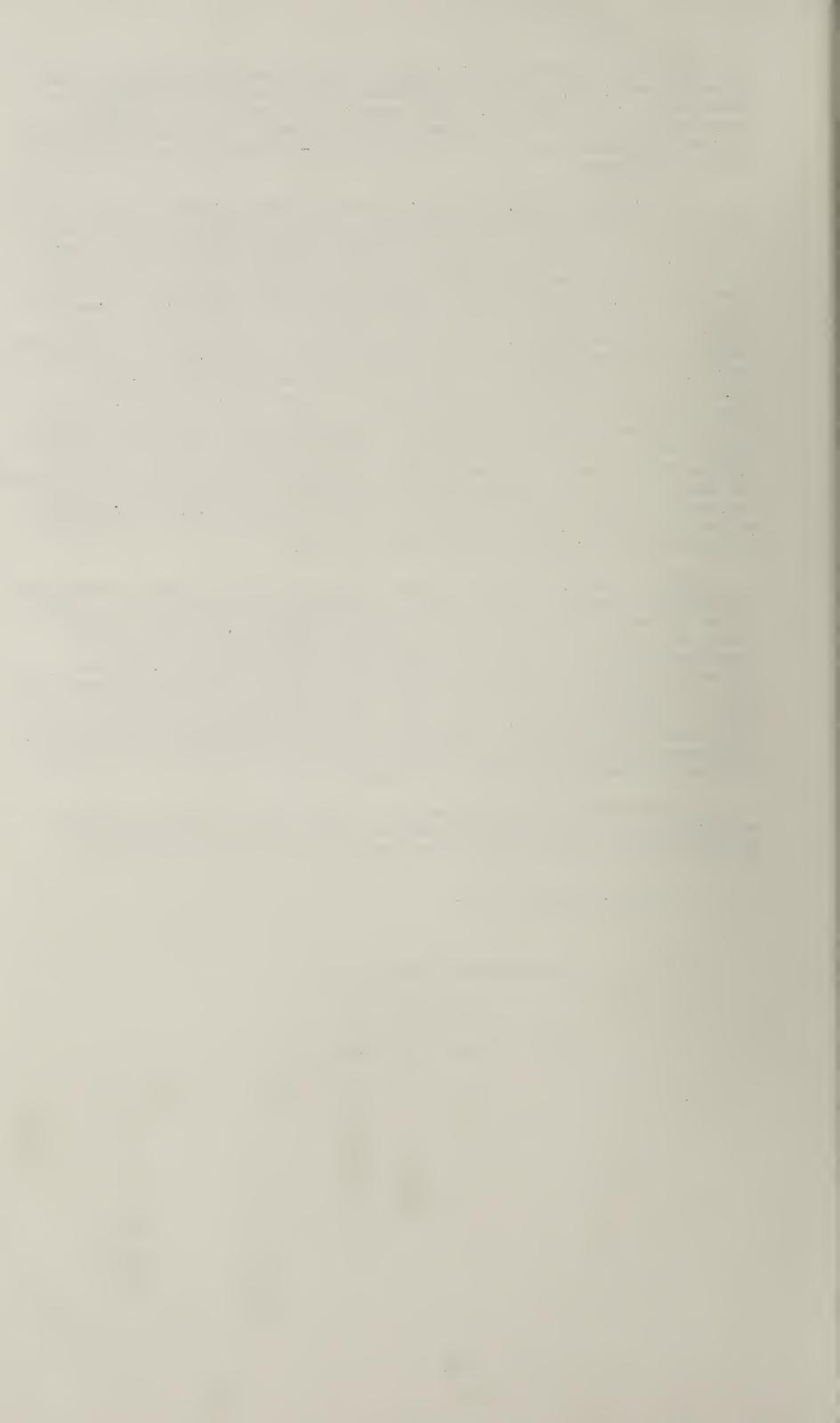
In concluding this general preface I should like to express to Members and Officers of all the District Councils in No. 7. Health Area my gratitude for the help and understanding I have received from them during the year.

I have the honour to be,

Your obedient Servant,

P.J. FCX

Medical Officer of Health.



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MIDICAL OFFICER OF HEALTH

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PUBLIC HEALTH IMSPECTOR

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Church House, Saltash, Cornwall.
Telephone - Saltash 3190.

CLERK

P.M. EVANS, (Mrs).

OPERATIVE

T. M. KELLY.

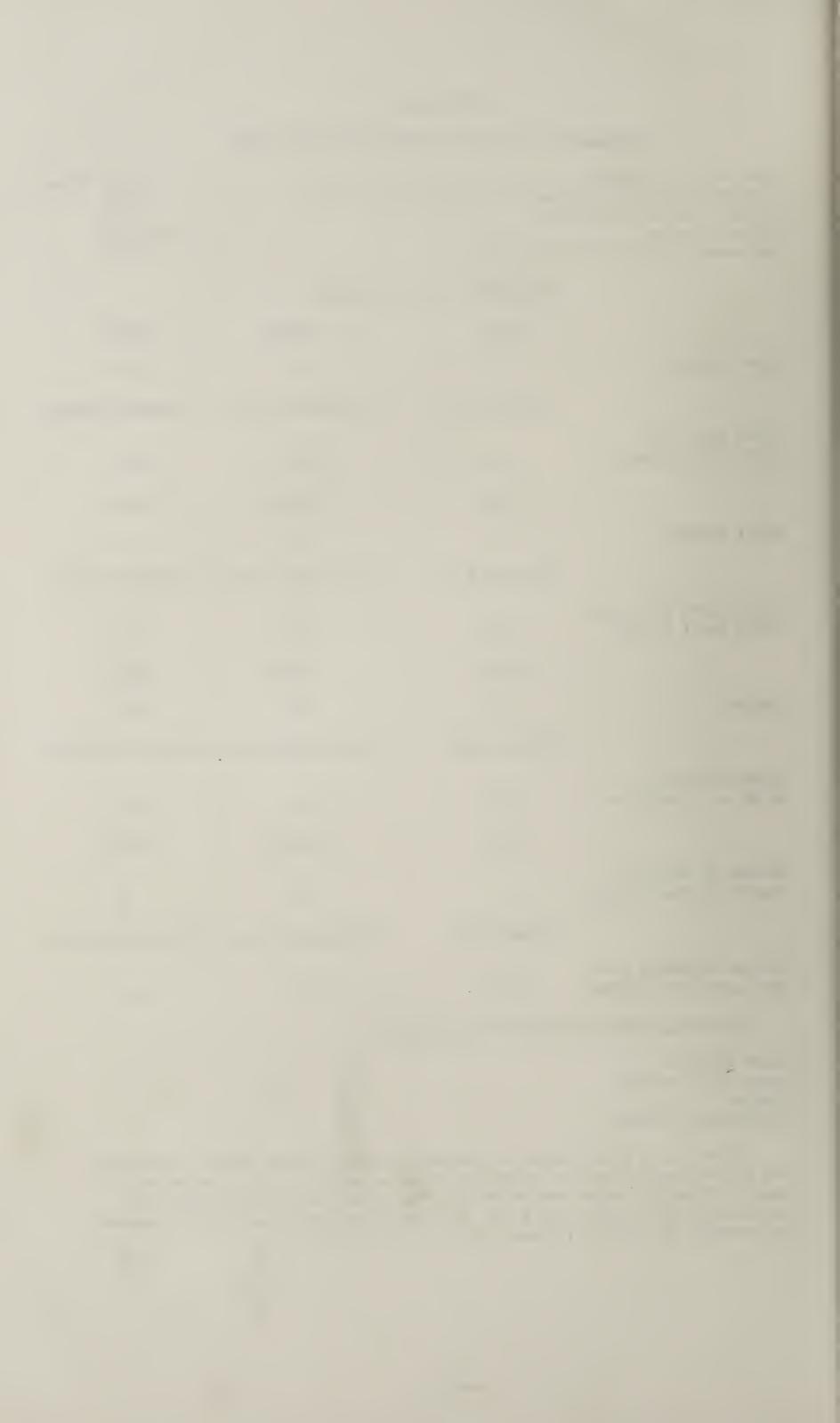


SECTION A.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

Area of the Borough Registrar General's est Number of inhabited hou Rateable value Estimated product of pro-	6,257 acres. 7,520 2,512 £215,463 £672		
	Vital Statistic	es for 1963.	
	Malo	Fenale	Total
Live Births	60	48	108
	Saltash M.B.	Health Area No. 7.	England & Wales
Birth rate per 1,000 of population	16.4	10.5	18.2
	<u>liale</u>	Forale	Total
Still births	1	1	2
	Saltash M.B.	Health Area No. 7.	England & Wales
Still birth rate per 1,000 total births	16.2	14.6	17.3
	Male	Fecale	Total
Deaths	62	53	115
	Saltash M.B.	Health Area No. 7.	England & Wales
Death rate per 1,000 of population	14.3	12.3	12.2
	Male	Fenale	Total
Deaths of infants under one year of age	1	2	3
	Saltash M.B.	Health Arca No. 7.	England & Walcs
Infant mortality rate per 1,000 live births	27.8	13.5	20.9
Principal Causes	of Deaths at all	Ages:	
Heart Disease Cancer (all sites) Stroke Respiratory disease		45 21 16 16	

There was a small excess of deaths over live births and the birth rate was below average, with the death rate above average. The four principal causes of deaths, which accounted for 85% of all deaths, were all more prevalent than in 1962. Of those who died during the year 49% had reached or exceeded the age of 75 years at the time of death.



SECTION B.

GENERAL PROVISION OF HEALTH SLRVICES FOR THE AREA

1. Particulars of the Public Health Officers of the Authority:

These particulars are incorporated at the beginning of the report.

There were no changes in the Department's staff during the year under review.

2. Committees:

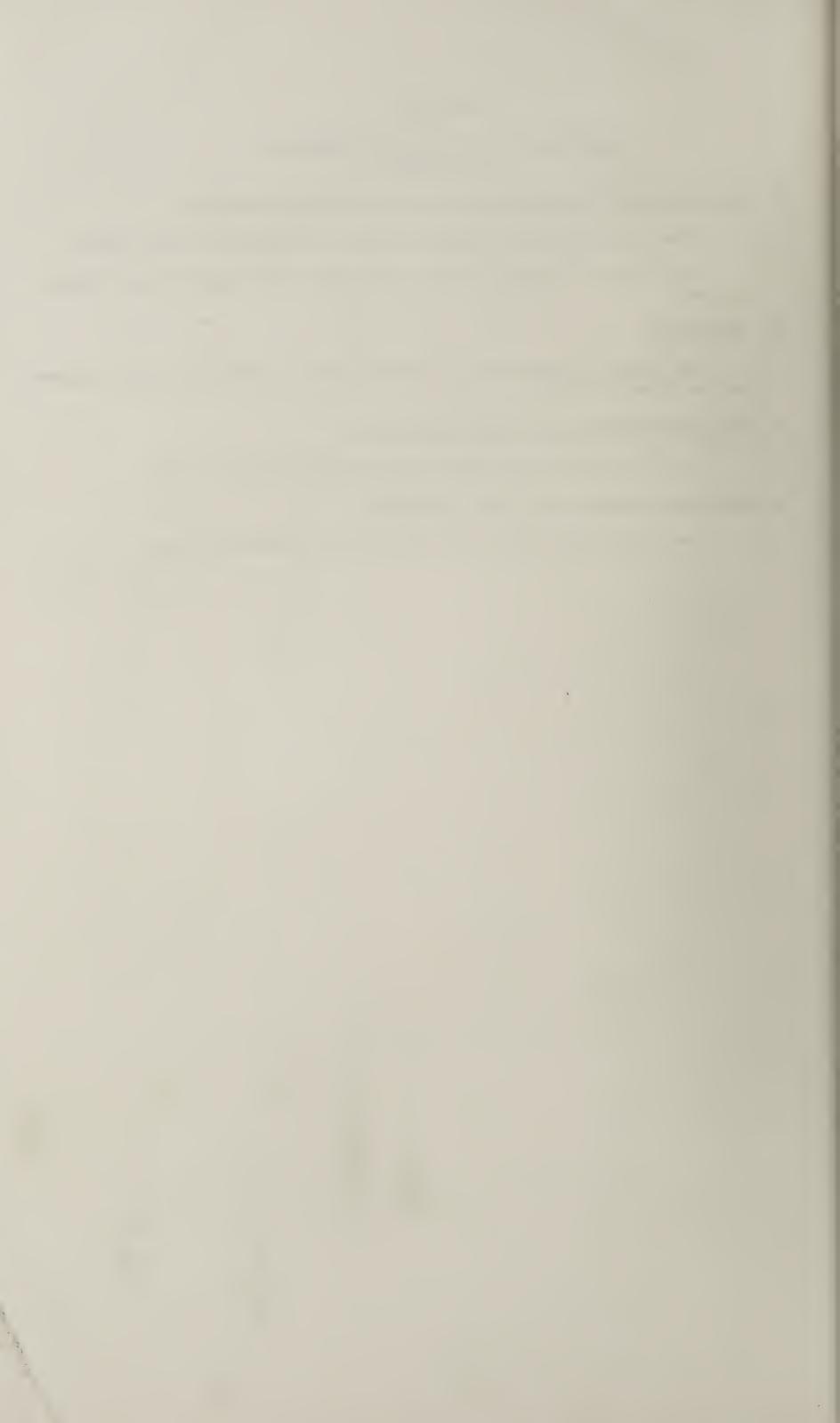
All Public Health matters are dealt with by the Public Health Committee of the Borough Council.

3. National Assistance Act, 1948, Section 47:

No action under this section was called for during the year.

4. National Assistance Act, 1948, Section 50:

One burial was arranged under this section during the year.



SECTION C.

PUBLIC HEALTH CIRCUNSTANCES OF THE AREA.

1. Water Supply:

(a) Quality:

The quality of mains water supplied to the Borough continued to be highly satisfactory. Samples for bacteriological examination were taken regularly by the Public Health Inspector, the results being as follows:

Satisfactory:

Unsatisfactory:

25

7

A small number of dwellings in remote parts of the Borough still obtain their supplied from shallow wells. A total of 3 samples was taken from these supplies and in every case a high degree of contamination was demonstrated.

(b) Quantity:

An ample quantity of water continued to be available and no restrictions were placed on its use.

(c) Plumbo-Solvency:

The total hardness of mains water varies from 1-3 p.p.h.t. The water has little or no action on lead and no cases of lead poisoning were reported.

(d) Proportion of Population Supplied from Public Water Mains:

Except for one or two isolated dwellings the whole of the Borough is now provided with a mains water supply. The proportion of the population supplied by means of stand-pipes is negligible.

2. Drainage:

The Department continued to exercise careful control over the construction of new drainage systems within the Borough. Three hundred and twenty visits were made by the Public Health Inspector in connection with drainage and five hundred and ninety tests were applied.

3. Severage:

A start was nade on the Teardesewerage scheme which will open up approximately fifty acres of land for development and provide means of drainage for the new Grammar School. The total capital cost of this scheme including the new sewage disposal works at Coonbe is £60,000.

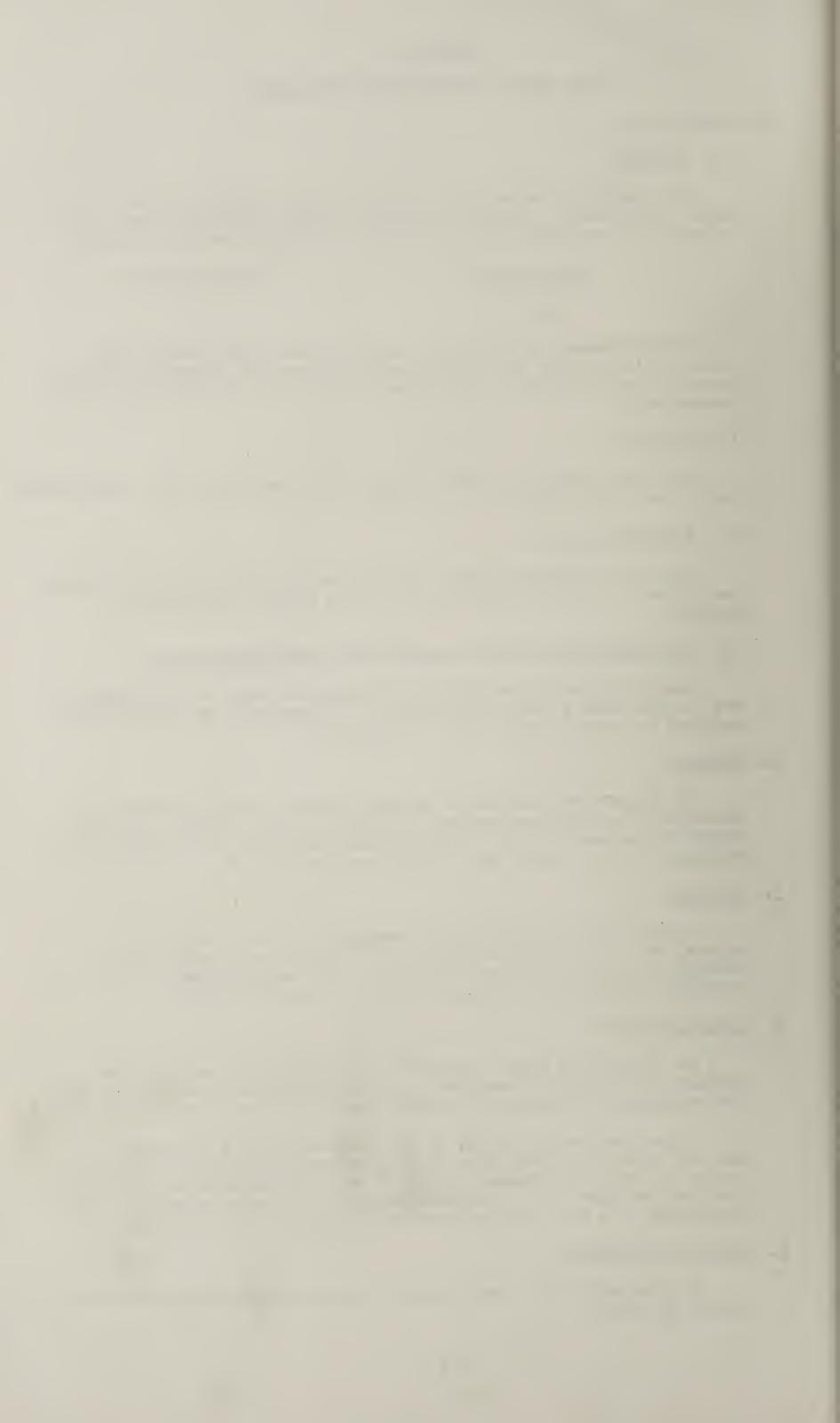
4. Sewage Disposal:

The disposal of sewage continued to be effected by means of five outfalls into the River Tamar and one outfall into the River Lynher. With the exception of the Salt Mill outfall, crude untreated sewage is discharged.

A start was made, however, on the construction of a new sewage disposal works at Coombe. This works is intended initially to receive sewage from the Weardesewerge scheme but will ultimately deal with sewage diverted from three of the existing outfalls. Work also commenced on the preparation of a scheme for a new sewage disposal works at Forder.

5. Closet Accommodation:

Ho conversions from earth closets to water closets were carried out during the year.



6. Public Cleansing:

(a) Refuse Collection:

Refuse collection in the Borough continued to be carried out in a satisfactory manner. The collection is made by means of one rear loading "fore and aft" tipper and collections are carried out once fortnightly in outlying areas, once weekly in the central area and twice weekly in the case of food shops.

Rapid development of the Borough is placing an increased burden on this single vehicle and it is becoming obvious that additional facilities will soon have to be provided.

(b) Refuse disposal:

Refuse continued to be disposed of by controlled tipping at the Salt Mill Tip. Every effort was made to comply with Government recommendations in respect of controlled tipping and regular measures were taken to eradicate insect pests and rodents.

Work continued on the construction of a bund enclosing the eastern part of Salt Mill creek. This bund will ultimately enclose an area of 175 acres and will provide tipping facilities for approximately 20 years.

(c) Salvage:

The recovery and collection of textiles and metals continued during the year, the total receipts for the sale of these materials for the period lst April, 1963 to 31st March, 1964 being £132 5s. Od.

(d) Street Cleansing:

Street cleansing continued to be carried out in a regular and efficient manner. The frequency varies from twice daily to once weekly according to the type of street.

(e) Cosspool Emptying:

The emptying of cosspools is carried out by arrangement with a neighbouring authority:

7. Public Conveniences:

Male and female public conveniences are provided at:

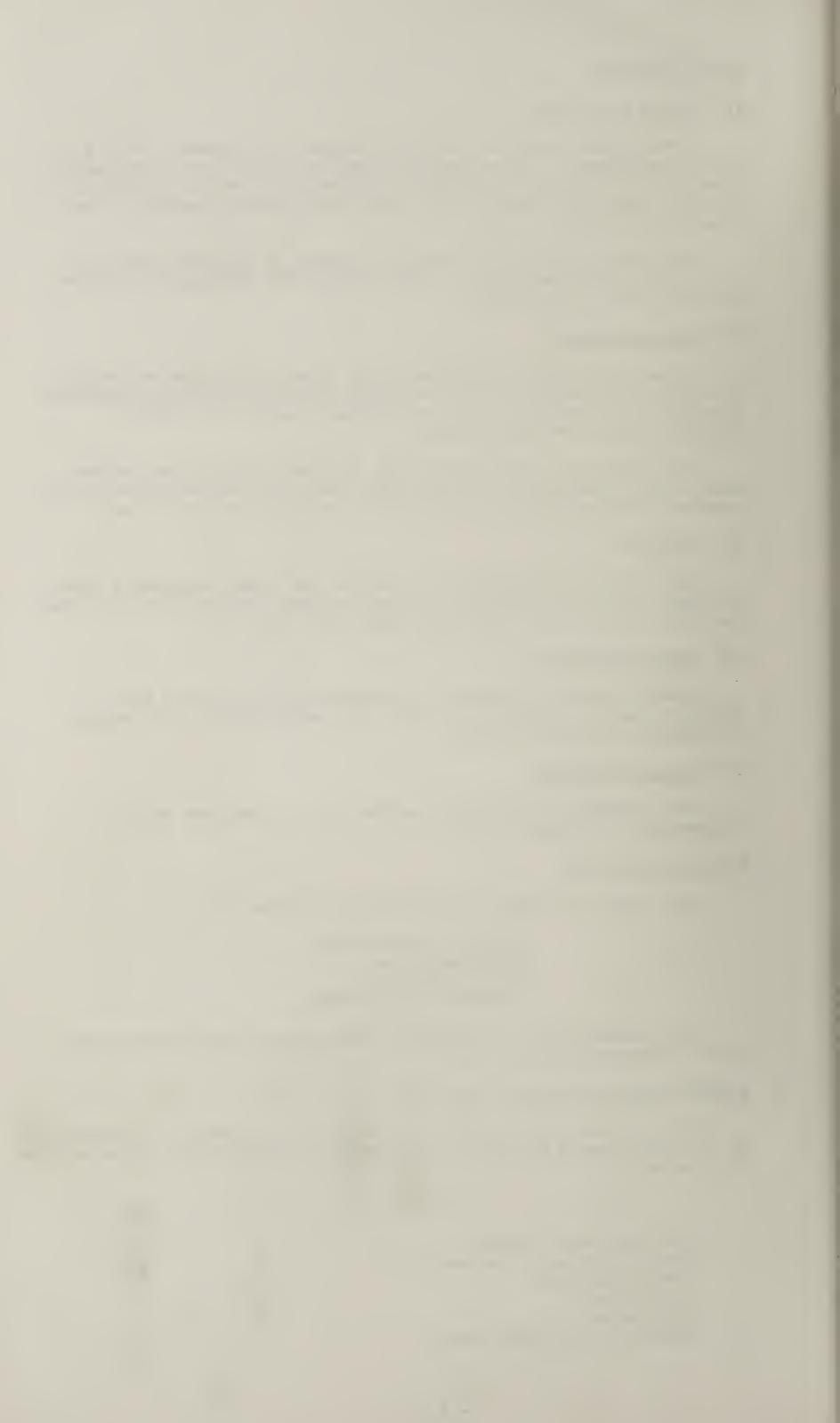
Eurraton Sports Field.
Longstone Park.
St. Stephens; and
Warfelton Sports Field.

Work started on the construction of new male and femule conveniences in the Alexandra Square car park.

8. Public Health Inspection of the Area:

The inspection of all districts continued to be carried out regularly by the Public Health Inspector, the following specific visits and inspections being made:

	ijo.
Individual unfit houses	46
Houses in proposed clearance areas	15
Moveable dwellings	2
Council buses	73
Overcrowding	1
Applicants for Council houses	56
	223



	No.
B/F'wd.	223
Council house exchanges	2
Lodger applications	14
Improvement grants	44
Rent arrears	56
Shed control	22
Grocers t shops	
Greengrocers shops	2
Butchers' shops	4
Fishmongers! shops	1
Ice-cream premises	9 2 4 1 7 2
Cafes, etc.	
Meat inspection	86 3 5 1 1 26
Slaughterhouses	3
Food inspection	5
Food complaints	1
Food poisoning	1
Water supply	
Ditches, streams, etc.	1
Pactories	14 1 2
Burial of the dead	1
Outworkers	
Drainage	320
Sewerage	47
Sewage disposal	19
Diseases of animals	1
Reeping of animals	2 1
Rodent control	
Offensive accumulations	4 2 2 10
Offensive odours	2
Noise nuisances	<u>ہ</u> 10
Petroleum spirit	Building Production and Adoption
	941
Other visits (unclassified)	116
	1,057
	E das abb. rapaminatoria Erido-rabi: idas abb. abb.

9. Pactories Act, 1961:

Co-operation continued to be maintained with H.M. Inspector of Factories in the exercise of the provisions of this Act.

The following table gives the number of factories in the Borough and details of inspections made by the Public Health Inspector. No defects were discovered.

INSPECTIONS.

Premises	Number on Register	Inspections	Number of Written Notices	Occupiers Prosecuted
(i) Factories in which sections 1,2,3,4, and 6 are to be enforced by the Local Authorities	4	4	** *	
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	11	10		
C/atvd.	15	14		



(iii	B/Fwd. Other premises in which Section 7 is enforced by the Local Authority (excluding out- workers premises)	15	14		e	
	Total:	20	14	Addig	944	

10. Outworkers:

One outworker was employed in the Borough during the year. Visits revealed that the working conditions in this case were satisfactory.

11. Pet Anirals Act, 1951:

No premises were licensed under this Act during the year.

12. Insect Control:

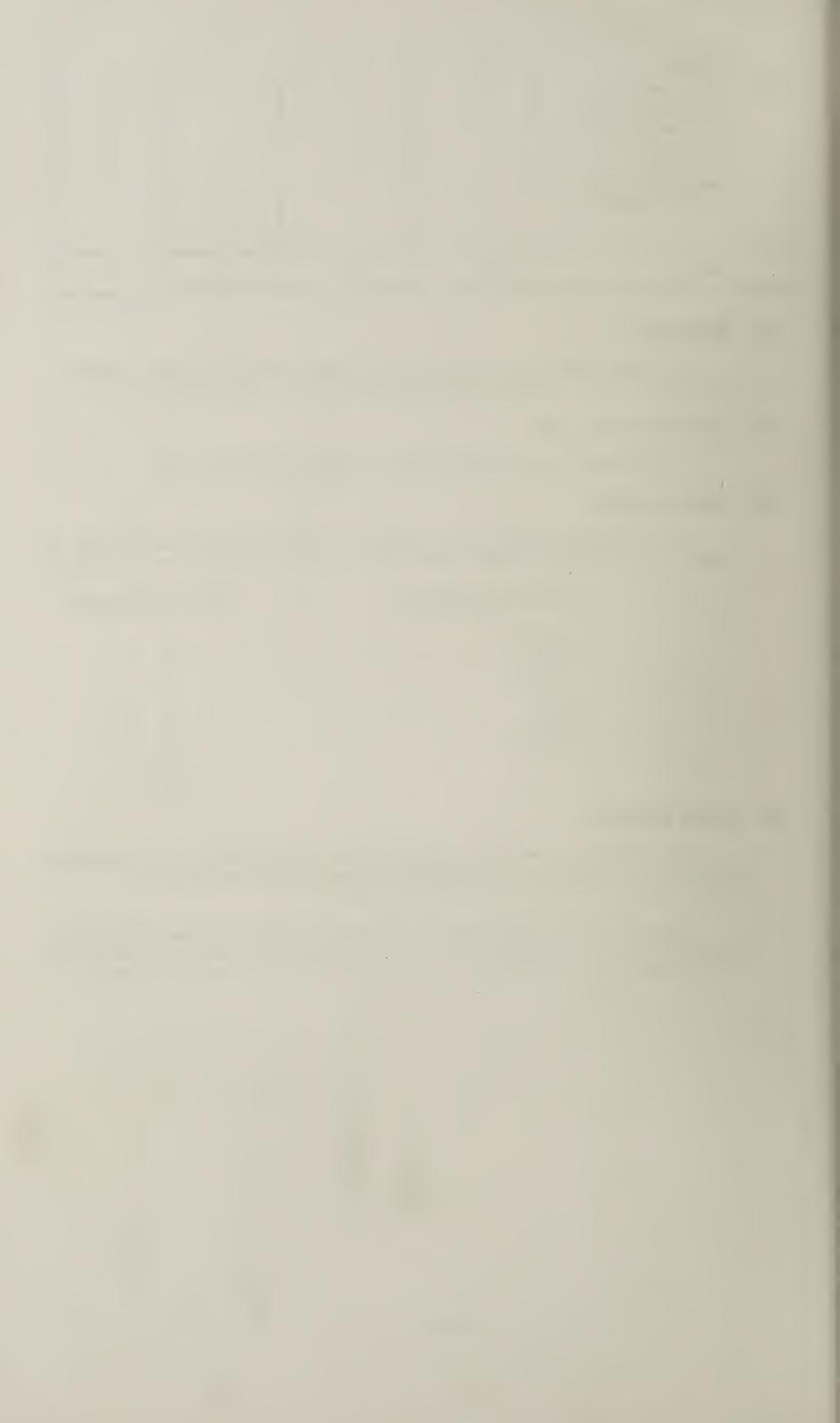
The Department continued to provide a service for the destruction of insect pests. The following table gives details of treatments carried out:

Type of Infostation:	No. of Treatments:
Bootles	6
Wasps	20
Hornots	1
Floas	2
Ants	4
Flics	4
Woodworn	9
	Spephendine St. e-Spep
	46
	Schools gline glin

13. Rodent Control:

The control of rodents continued to be carried out on the lines laid down by the Ministry of Agriculture, Fisheries and Food under the supervision of the Public Health Inspector.

During the year six hundred and fifty seven inspections were made by the Operative, two hundred and seventy four infestations being discovered. A successful treatment was carried out in the case of each infestation.



SECTION D.

HOUSING

1. Demolition of Unfit Houses:

(a) Clearance Areas:

On the 13th day of August, 1963 the Borough Council declared two further areas to be clearance areas namely - The Waterside Clearance Area No. 5. (comprising nine houses) and the Waterside Clearance Area No. 6. (comprising nine houses). A compulsory purchase order was subsequently made in respect of both areas.

(b) Individual Unfit Houses:

No individual unfit houses were demolished during the year.

2. Closure of Unfit Houses:

No houses were closed for the purpose of human habitation.

3. Repair of Unfit Houses:

Two houses were rendered fit as a result of informal action by the Council.

4. Certificates of Disrepair:

No applications for the issue or revocation of certificates of disrepair were received by the Council during the year.

5. Improvement Grants:

(a) Discretionary Grants:

In the period 1st April, 1963 to 31st March, 1964 one discretionary grant was made by the Council, the grant amounting to 2266 17s. 2d.

(b) Standard Grants:

In the period 1st April, 1963 to 31st March, 1964 seven standard grants were made by the Council, the grants totalling £705 5s. 6d.

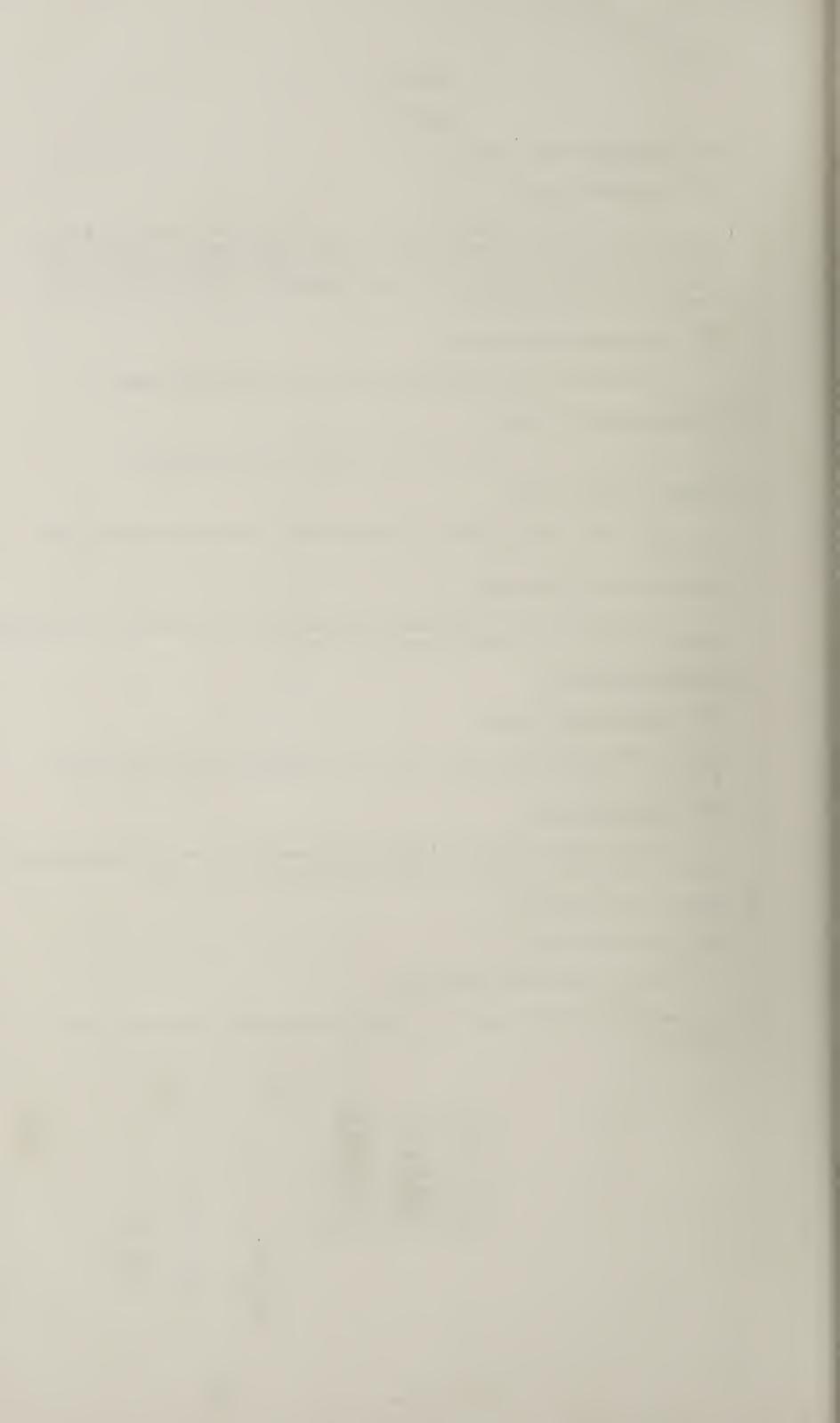
6. New House Construction:

(a) Local Authority:

Two new raison: ttes were built.

At the end of the year the Council possessed 576 houses rade up as follows:

	Ho.
One bedroom flats Two bedroom flats Three bedroom flats Frefabricated houses Two bedroom houses	40 113 9 39 60
Three bedroom houses	269 6 5'76



(b) Private:

Sixty five private duellings were prected in the Borough during the year.



SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

1. Milk:

Milk supplied to the town continued to be obtained from several private producers and from a large pasteurising establishment. The supervision of the production of milk on farms continues to be in the hands of the Ministry of Agriculture, Fisheries and Food. The pasteurising establishment is inspected and controlled by officers of the County Council.

2. Meat:

(a) Slaughterhouses:

One slaughterhouse is licensed in the Borough. The building complies with the Slaughterhouse (Hygiene) Regulations, 1958 and the Slaughterhouses (Prevention of Cruelty) Regulations, 1958 and is maintained in a highly satisfactory condition.

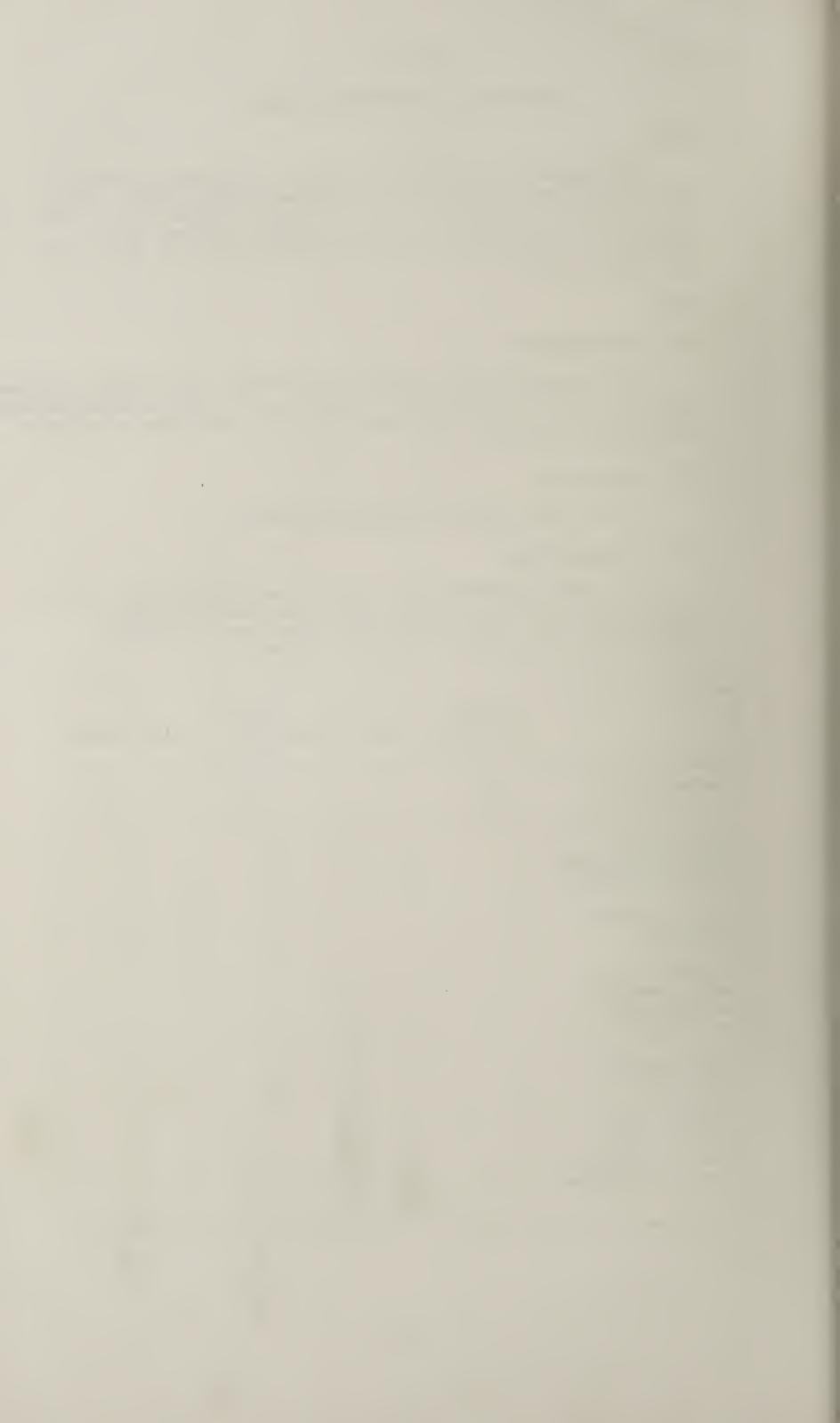
(b) Slaughtermen:

Five men were licensed to slaughter animals.

(c) Meat Inspection:

All animals slaughtered were inspected according to the method and criteria of meat inspection recommended by the Meat Inspection Regulations, 1963. The following table gives details of animals slaughtered and inspections made during the year.

					-	
	Cattle Excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed Number inspected	118 118	great Gang	-	138 138	dang	
ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCOSIS:						
Whole carcases conderned:	pui .			Comp		· -
Carcases of which some part or organ was condermed:	6	sed	-	1	~	_
Percentage of the number inspected affected with disease other						
than tuberculosis and cysticercosis;	5	-	-	0.7		-



TUBERCULOSIS ONLY:			, 	į.		\ \ \ \ \
Whole carcases condemned:	-				7	
Carcases of which some part or organ was condemned:						
Percentage of the number inspected affected with tuberculosis:		Sind	Vivali			-
CYSTICERCOSIS ONLY:		n districtive statements advanta substitution	net in Minister aught, die vorge van der der verden.	AMBERT STATESTE LEGAL AUGUSTALANTE AUGUSTALANTE		
Carcases of which some part or organ was condemned:	l	Orași	- Georgia			-
Carcases submitted to treatment by refrigeration:	1				T	
Generalised and totally condemned:	_	Read				-

3. Ico-croam:

Twenty three premises are registered under Section 15 of the Food and Drugs Act, 1955 for the storage and sale of ice-cream and one for the manufacture storage and sale of ice-cream.

Twelve samples of ice-cream were taken and submitted for bacteriological examination. The results in each case were satisfactory.

4. Other Foods:

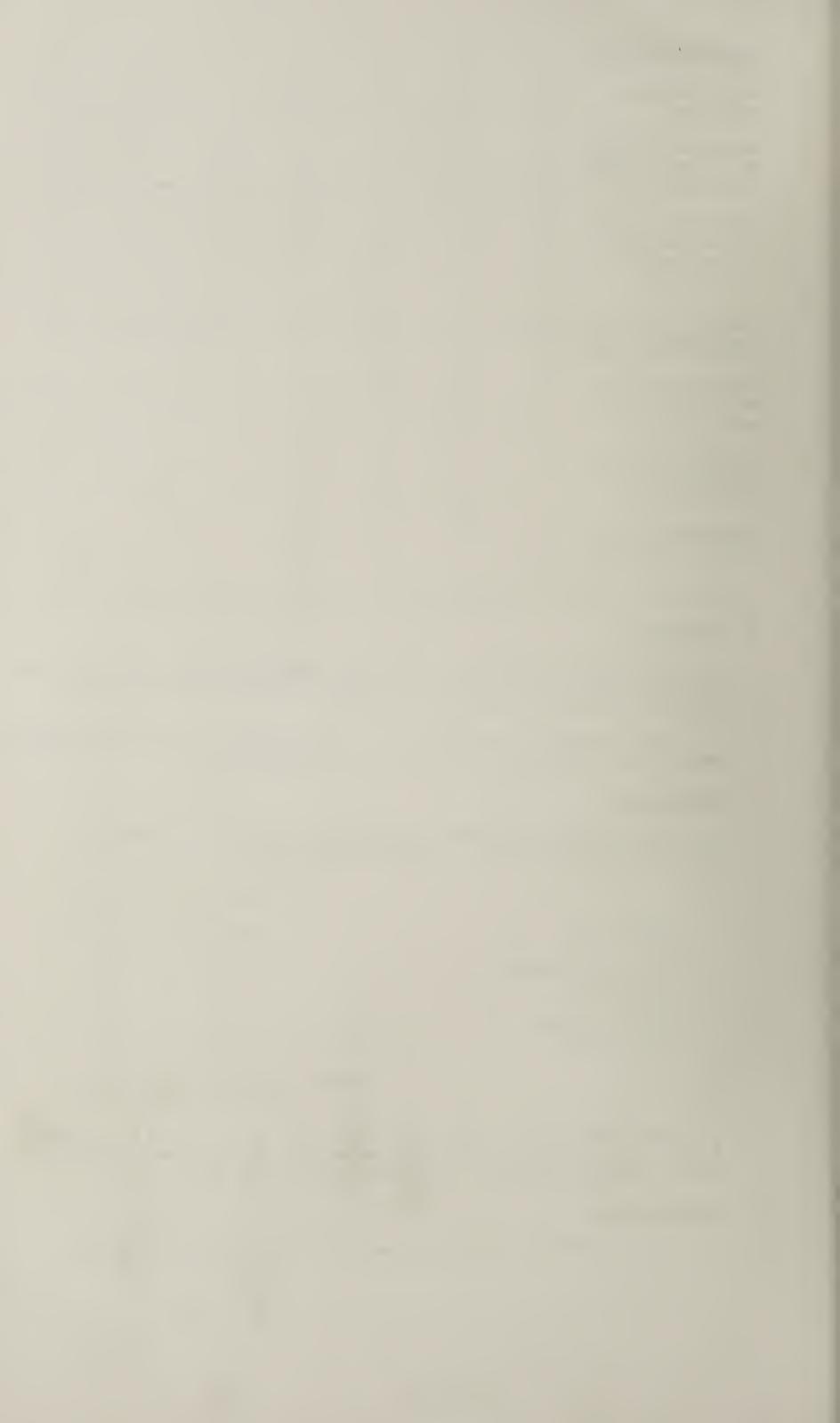
The following food-stuffs were inspected, found to be unfit for human consumption and were surrendered voluntarily:

		lbs.	ozs.
Canned meat Canned fruit Canned vegetables		163 373 47	3 15 15
Canned fish Gream		29 3	1 10
Canned pudding Canned milk		5 17	7 12
	Total:	544	4

During the previous year (1962) the amount of food found to be unfit (other than neat at the Slaughterhouse) was 238 lbs. 11 ozs. There was thus an increase during the year under review of 406 lbs. 9 ozs.

5. Food Premises:

(a) The number of Food Premises in the Area by type of business:



Grocers	25
Balters and confectioners	5
Dutchers	3
Cafes and restaurants	3
Fish fryers	3
Fish-mongers	3
Grenngrocers	4
Dairies	i
Distributors of milk	16
Licensed premises	10

(b) The number of Food Premises by type, registered under the Food and Drugs Act, 1955, Section 16:

(i) Ice-cream:

Grocers	14
Bakers	3
Cafes	3
Mixed premises	2
é o	British and a second of
	22
	trans-min

(ii) Other:

Butchers Fish-fry	Making)	8
		11

6. Educational Activities:

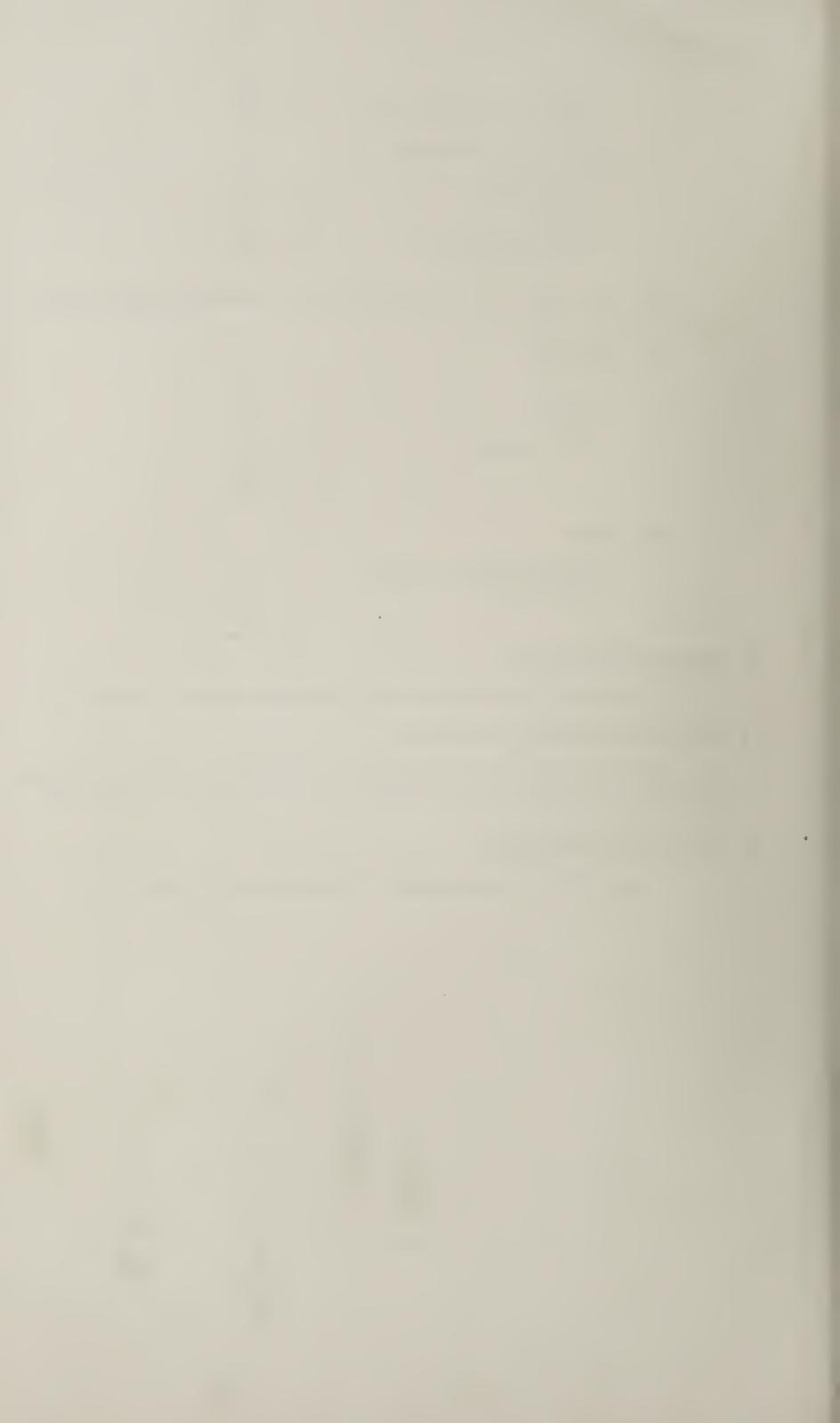
No new educational activities were undertaken during the year.

7. Method and Disposal of Unfit Food:

Unfit food continues to be disposed of by burial at the Salt Mill tip. Meat found to be unfit at the Slaughterhouse is stained with liquid acid green before removal.

8. Food Poisoning Outbreaks:

No cases of food poisoning were notified during the year.



SECTION F.

PIEVALENCE OF AND CONTROL OVER IMPECTIOUS AND OTHER DISEASES

1. Notifiable Diseases (other than Tuberculosis):

Becuase of an outbreak of measles during June, July and August, the prevalence of notifiable disease was moderate during 1963. Of the total of 268 cases, measles was responsible for 240 cases, and the incidence of other notifiable diseases was correspondingly light. None of the more serious types of infectious disease occured, and there were no deaths from this group of diseases.

The following are details of cases, and case rates of notifiable disease during 1963:

Rate per 1,000 of population

Disease	Cases	Saltash M.B.	Health Area No. 7.
Measles	240	33.10	11.58
Pneumnia	11	1.52	0.79
Erysipelas	9	1.24	0,20
Whooping cough	4	0.55	0.10
Scarlet fever	3	0.41	0.20
Dysentery			
(Sonne)	1	0.14	0.58

2. Tuberculosis:

The number of new cases notified during 1963 was 3, the same as in the previous year. Of these new cases, 2 were non-respiratory infections, and one was a respiratory infection. Contrary to recent experience with this disease which has tended to affect middle aged and older people, all three cases in this instance were below the age of 45 years. There were no deaths from tuberculosis during 1963.

The following are details of new cases and case rates during the year:

Age Group	New C	Cases:	
	$\underline{\mathtt{M}}$	Ŧ,	
0 - 4	enel	-	
5 - 14	***	1	
15 - 24	PH4	1	
25 - 44	1	a-es	
45 - 64	ents	gents.	
65 and over	••	•••	
	Estable Laboration and Control of	^	
	1	2	
		E-200 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	

Rate per 1,000 of population

	Saltash M.B.	Health Area No. 7.
New cases	0.41	0,22
All known cases	4.55	4.25
Deaths	-	0.02

At the end of 1.43 there were 29 known cases of respiratory tuberculosis and 4 known cases of mon-respiratory tuberculosis resident in the Borough.



PRINCIPAL CAUSES OF DEATH -ALL AGES- 1963

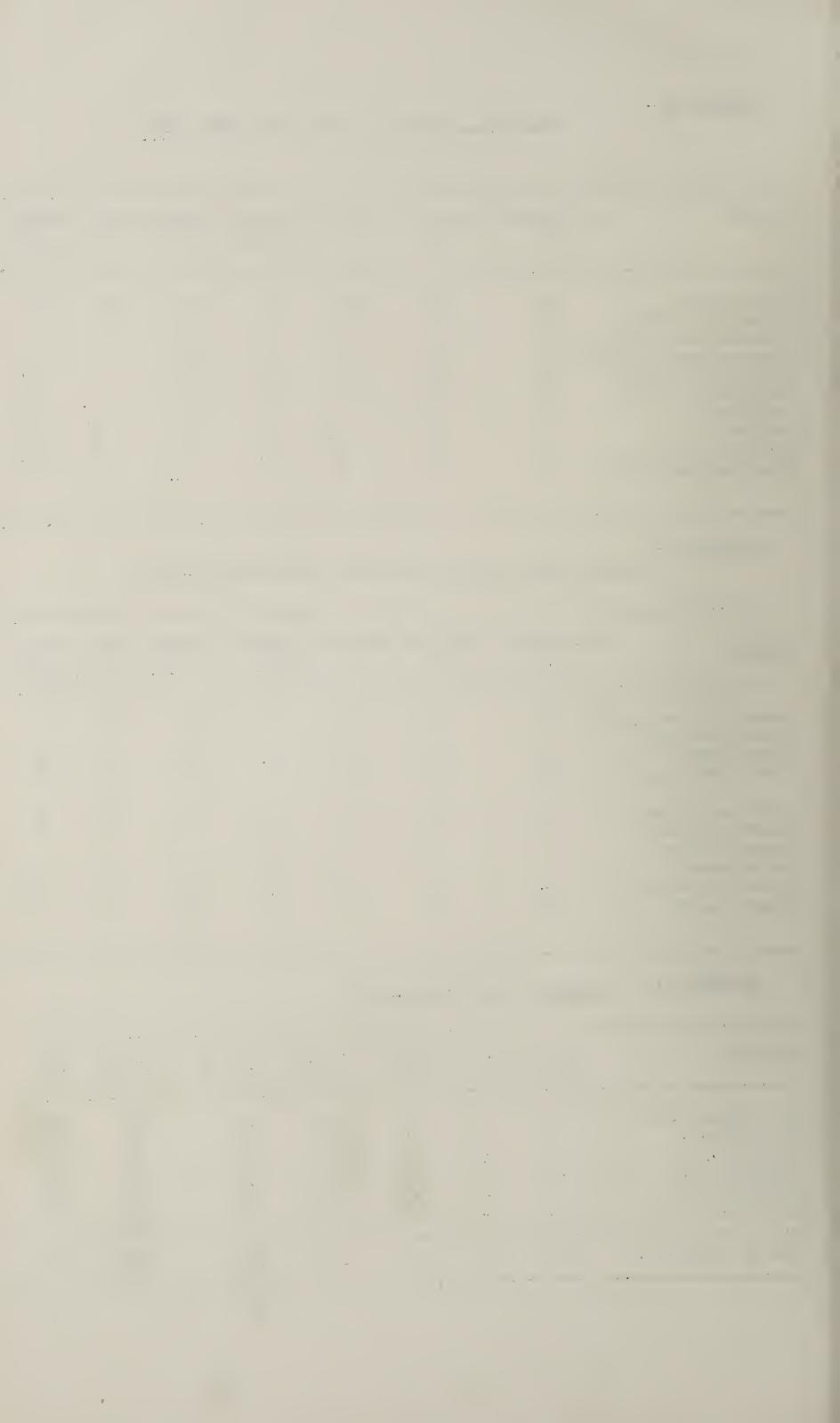
DISEASE	ST. GERMANS R.D.	LISKEARD R.D.	SALTASH M.B.	TORPOINT U.D.	LISKEARD M.B.	LOOE U.D.	HEQLIH AREA NO. 7.
Heart disease Cancer (all sites) Vascular lesions of nervous system (stro Respiratory disease Circulatory disease Accidents Suicide Digestive disease Genito-urinary disease	20 1.2 6 4 3	76 30 20 20 6 2 2	45 21 16 16 3 2	1/4 10 10 10 1	44 17 21 6 4 2 1	22 11 6 3	275 123 107 75 26 13 8 6

APPENDIX 2. TYPES OF HEART DISEASE AND CANCER CAUSING DEATH - 1963

TYPE OF ST	. GERMANS R.D.	LISKEARD R.D.	SALTASH M.B.	TORPOINT U.D.	LISKEARD M.B.	LOOE U.D.	HEALTH AREA No.7.
Coronary disease, angin	a 39	29	21	9	1 3	12	123
heart disease Other heart disease	5 30	5 42	2 22	5	3 28	10	15 137
Cancer of stomach Cancer of breast Cancer of lung	<i>3</i> 8	6 2	3	2 3	6 1	1	21 15
and bronchus Cancer of uterus Other cancers	7 - 16	6 - 16	2 3 13	1 - 4	2 1 7	2 - 7	20 4 63

APPENDIX 3. DEATHS BY AGE GROUPS - 1963

DISTRICT	0 - 4 Years	5 - 14 Years	15 - 44 Years	45 ~ 64 Years	65 - 74 Years	75 years & Over	ALL AGES
ST. GERMANS R.D. LISKEARD R.D. SALTASH M.B. TORPOINT U.D. LISKEARD M.B. LOOE U.D.	4 3 4 - 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5 11 3 2 -	40 28 22 9 14 9	52 54 29 12 25 13	109 83 56 28 62 24	211 179 115 51 102 48
HEALTH AREA NO. 7.	12	2	23	122	185	362	706



APPENDIX 4.

TUBERCULOSIS

NEW CASES AND DEATHS IN HEALTH AREA NO. 7. - 1963

AGE GROUP	NEW CASES M F	DEATHS. M. F	
0 - 4 YEARS 5 - 14 YEARS 15 - 24 YEARS 25 - 44 YEARS 45 - 64 YEARS 65 YEARS AND OVER	1 1 2 2 2 1 4		
NEW CACIE DAME TOTAL	MALES	FEMALES	TOTAL
NEW CASE RATE PER 1,000 of POPULATION	0.08	0.14	0.22
MORTALITY RATE PER 1,000 of POPULATION	0.02	~	0.02

CASE RATES AND MORTALITY RATES PER 1.000 OF POPULATION IN THE SIX COUNTY DISTRICTS IN HEALTH AREA NO. 7. - 1963.

DISTRICT	NEW CASES	ALL KNOWN CSSES AT 31.12.63	DEATHS
ST. GERMANS R.D.	0.07	3.73	0.07
LISKEARD R.D.	0.15	4.05	••
SALTASH M.B.	0.41	4.55	•
TORPOINT U.D. LISKEARD M.B.	 0 . 88	4.71 6.78	648 SSR
LOOE U.D.	0.27	5.33	P40
HEALTH AREA NO.7.	0.22	4.25	0.02
CORNWALL COUNTY	0.36	5.17	0.08

APPENDIX 5.

CANCER OF THE LUNG AND BRONCHUS DEATHS BY AGE GROUPS - 1963

AGE GROUP	MALES	FEMALES
45 - 54 YEARS 55 - 64 YEARS 65 - 74 YEARS 75 YEARS AND OVER	4 6 7	- 2 1
	17	3

DEATH RATE PER 1,000 OF POPULATION - 1963

	MALES	FEMALES	TOTAL
HEALTH AREA NO. 7	0.338	0,060	0.398
CORNWALL COUNTY	0.305	0.091	0.396
ENGLAND AND WALES	0.441	0.078	0.519

4.4



